

ISSUE SLIP STABLE AREA for additional cross references

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>SP</i>		6-8-00

INDEX OF CLAIMS

✓ Rejected
 - (Through numeral) Allowed
 Canceled
 Restricted

1
 2
 A
 1

Non-elected
 Interference
 Appeal
 Objected

Claims	Date	Claims	Date	Claims	Date
1		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
10		60		110	
11		61		111	
12		62		112	
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14		64		114	
15		65		115	
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18		68		118	
19		69		119	
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23		73		123	
24		74		124	
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27		77		127	
28		78		128	
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31		81		131	
32		82		132	
33		83		133	
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35		85		135	
36		86		136	
37		87		137	
38		88		138	
39		89		139	
40		90		140	
41		91		141	
42		92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

BEST AVAILABLE COPY